

Guide to Finding Health Coverage

Indiana

Are you uninsured? You are not alone. Millions of Americans have no health coverage. Some lost their insurance when they lost their jobs. Others work hard, but their jobs don't provide health insurance benefits. Whatever the reason, finding health coverage can be difficult. If you are looking for coverage, this guide can help you find the coverage you need.



The road to finding health coverage depends on where you start. Everyone has different circumstances. Starting with number 1, find the question that best describes your situation.

Start here:

- 1.** Did you recently lose your health insurance because you lost your job?
- 2.** Did you recently lose your job because of trade policy—for example, increased imports or jobs moving overseas?
- 3.** Are you an early retiree who has lost your health coverage?
- 4.** Could you be eligible for Medicaid, the Children's Health Insurance Program (CHIP), or other government programs?
- 5.** Do you have a serious medical condition or a disability?

If options 1-5 don't work, try these:

- 6.** What do you need to know about buying insurance on your own?
- 7.** Where can you find help if you can't find coverage?

1 If you recently lost your health insurance because you lost your job . . .

. . . first, see if you can get coverage through your spouse's, partner's, or parent's job.

If your spouse has insurance through his or her job, and the employer offers dependent coverage, you may be able to join your spouse's job-based health plan. Under a federal law called "HIPAA," you have a special 30-day opportunity to enroll in your spouse's plan, even if it is not open-enrollment season. A parent's or domestic partner's plan may also allow you to enroll outside of open-enrollment season if you've lost your coverage.

. . . second, if you can't get coverage through your spouse's, partner's, or parent's job, and your former employer had at least 20 workers:

Under a federal law called "COBRA," if your former employer had at least 20 workers, you probably have the right to stay in the health plan you had at that job. This is known as "continuation coverage." You must act quickly—you generally have only 60 days to sign up for continuation coverage after your employer gives you the required COBRA notice. (For more information on COBRA help, see "Costs and Subsidies for COBRA" on page 3.)

COBRA provides important protections for people who have been diagnosed with, or treated for, a health condition. Under COBRA, because you are staying in your former employer's health plan, you will still be entitled to all of the services that are covered under that plan. If you choose not to take the COBRA option and instead look for coverage in the individual health insurance market, you may not be able to find a plan that will cover your pre-existing conditions. Furthermore, if you elect COBRA and keep that coverage for as long as you are eligible, when that coverage ends, you are guaranteed the right to buy certain individual health insurance policies even if you have pre-existing conditions.

COBRA usually guarantees 18 months of coverage, but under special circumstances, you can get 29 or 36 months of coverage.



FOR MORE INFORMATION, see Families USA's publication, *Getting Covered: Finding Health Insurance When You Lose Your Job*, available online at www.familiesusa.org/assets/pdfs/getting-covered.pdf.

If you had family coverage through your job, you can elect COBRA coverage for some or all of your family members, depending on their needs and other coverage options.



TO LEARN MORE about your COBRA rights, check out the U.S. Department of Labor's Web page at www.dol.gov/cobra or call toll free 1-866-444-3272.

Costs and Subsidies for COBRA

COBRA coverage can be expensive, but you may be able to get help with these costs.

Usually, COBRA requires people to pay the full cost of premiums themselves (that is, the same amount they paid while they were employed, plus the share that their employer paid) in addition to a small administrative fee, which together can be a hefty burden.

However, anyone laid off between September 1, 2008, and December 31, 2009, may be eligible for a federal subsidy to help pay for continuation coverage and make it more affordable. The economic stimulus bill—the American Recovery

and Reinvestment Act (ARRA)—created federal subsidies that help laid-off workers by covering 65 percent of their COBRA premiums. For details, see *Understanding COBRA and Mini-COBRA Premium Assistance*, available online at www.familiesusa.org/issues/private-insurance/understanding-cobra-premium.html.

Your former employer (the human resources or personnel department) or health plan is required to tell you about your COBRA rights, including your rights to assistance under ARRA.

2 If you recently lost your job because of trade policy—for example, increased imports or jobs moving overseas . . .

. . . a tax credit offered through the Trade Adjustment Assistance Reform Act (TAARA) may cover 80 percent of the cost of your health insurance.

You might qualify for this help, for example, if your employer laid off workers because the company's products were replaced by products from other countries or because the company is using more workers in other countries.



TO LEARN MORE about this option, contact the Health Coverage Tax Credit (HCTC) Customer Contact Center toll-free at 1-866-628-HCTC, or check out their Web site at www.irs.gov (type "HCTC" in the search box).

3 If you are an early retiree who has lost your health coverage . . .

. . . the same law that helps workers who lose their jobs because of trade policy may help you.

If you are a retiree aged 55 or older, your former employer no longer provides your pension, and your pension benefit is paid by the federal Pension Benefits Guaranty Corporation, you can receive help with 80 percent of the cost of health insurance until you are eligible for Medicare. You may also have the right to enroll in a spouse's plan or the right to elect COBRA (see question 1).



TO LEARN MORE about this option, contact the Health Coverage Tax Credit (HCTC) Customer Contact Center toll-free at 1-866-628-HCTC, or check out their Web site at www.irs.gov (type "HCTC" in the search box).

4 If you have a low or moderate income . . .

. . . there are programs that provide health coverage to people who cannot afford to buy it on their own.

You or your family members may qualify, even if you work. Generally, you and your family can get coverage if you are uninsured and meet the eligibility requirements. However, these programs have income limits and may have asset tests. In Indiana, the main programs are Hoosier Healthwise, Medicaid Select, and Healthy Indiana. Hoosier Healthwise is the name for Indiana's Children's Health Insurance Program.

Children can often get coverage—even if their parents don't qualify—because the income limits are usually higher for children. In Indiana, children can generally get coverage if their family incomes are less than the following:

| Size of Family | 2 | 3 | 4 |
|----------------|----------|----------|----------|
| Annual Income | \$36,425 | \$45,775 | \$55,125 |

If you are pregnant and meet the income limits shown below, you can get coverage during your pregnancy and for up to 60 days after your baby is born. Often, your baby will then have guaranteed coverage for at least one year.

| Size of Family (including unborn baby) | 2 | 3 | 4 |
|---|----------|----------|----------|
| Annual Income | \$29,140 | \$36,620 | \$44,100 |

If you are a parent with dependent children, you may be eligible for coverage if your family income is less than the following:

| | | | |
|----------------|---------|---------|---------|
| Size of Family | 2 | 3 | 4 |
| Annual Income | \$2,914 | \$3,662 | \$4,410 |

Healthy Indiana Plan (HIP)

If you are uninsured and do not have access to job-based coverage, you may qualify for the Healthy Indiana Plan, a free or low-cost health insurance program run by the state. The program offers a more limited benefits package than what is available in Indiana's traditional Medicaid program. Your monthly premium and deductible may vary based on your income.

If you are a parent, you may be eligible for coverage if your family income is less than the following:

| | | | |
|----------------|----------|----------|----------|
| Size of Family | 2 | 3 | 4 |
| Annual Income | \$29,140 | \$36,620 | \$44,100 |



TO LEARN MORE about the rules and how to apply, contact the Healthy Indiana Plan at 1-877-GET-HIP9 or visit <http://www.in.gov/fssa/hip/>.

If you have a disability, see question 5 on page 6.

If you are not a U.S. citizen, you might be able to qualify for coverage, depending on your immigration status and how long you have lived in the United States.

If you aren't sure whether or not you are eligible, it is best to apply rather than trying to guess, because the income rules for these programs are complicated.



TO LEARN MORE about the Medicaid program in Indiana, Medicaid Select, call 1-800-863-6154 or TTY 1-800-447-6404. If you do not speak English, you have a right to get help in languages other than English.



TO LEARN MORE about the Children's Health Insurance Program in Indiana, Hoosier Healthwise, call 1-877-KIDSNOW or visit www.insurekidsnow.gov.

There may also be other programs that can help you pay for health insurance. Be sure to ask about other available programs when you contact Hoosier Healthwise, Medicaid Select, or the Healthy Indiana program.

More Help Finding Your Way

You may need more help finding out what programs exist, if you qualify, and how to navigate the system. You may be able to get this help from the following:

- Call Indiana Legal Services, Inc., at 1-800-869-0212 or visit their Web site at www.indianajustice.org to find the legal services office that is closest to where you live.
- You can also check www.lawhelp.org to find free legal aid programs.

5 If you have a serious medical condition or a disability . . .

. . . there are three main programs that may help you. Those programs are Medicare, Medicaid Select, and Indiana's high-risk pool, the Indiana Comprehensive Health Association.

Medicare

You might qualify for Medicare, even if you are under 65, if you have a disability that is expected to last at least a year or that is expected to cause your death. In order to get Medicare because you are disabled, you have to apply for Social Security Disability Insurance (SSDI), and you must receive SSDI for 24 months before you can enroll in Medicare. Until that time, you will have to find another source of health insurance, such as COBRA (see page 2) or one of the other options discussed below.



TO LEARN MORE about SSDI, call the Social Security Administration's toll-free number at 1-800-772-1213 (TTY 1-800-325-0778).

TO LEARN MORE about Medicare, call 1-800-MEDICARE (633-4227) or visit the Medicare Web site at www.medicare.gov.

Medicaid Select

If you are blind or have a disability and if your income is low or you spend most of your income on health care, you may qualify for Medicaid. People who have a disability and who qualify for Supplemental Security Income (SSI) usually get Medicaid, but you may be able to get Medicaid while you are waiting to find out if you are eligible for SSI. Even if you do not qualify for SSI, you may still be able to get health coverage through Medicaid.



TO LEARN MORE about the rules and how to apply, contact the Indiana Medicaid program toll-free at 1-800-843-6154 or TTY 1-800-447-6404.

Indiana's High-Risk Pool for People with Health Problems

High-risk pools are nonprofit programs some states have created that sell health insurance to people who have been turned away by insurance companies or who are offered very limited or expensive policies because they or a family member have an existing health problem. The state designates particular insurance companies or particular insurance policies that must be sold to high-risk people.



TO LEARN MORE about Indiana's high-risk pool, the Indiana Comprehensive Health Association, call 1-800-552-7921, or visit www.onlinehealthplan.com. Ask if you qualify, which services are covered, and how much it costs. Also, if your income is low, ask if the high-risk pool provides extra help with the cost of premiums.

More Help Finding Your Way

Because these programs are so complicated, you may want additional help. For example, many people are turned down for Medicare or Medicaid coverage the first time they apply. You may need to appeal this decision more than once. The following agencies may be able to help:

- Call Indiana Legal Services, Inc., at 1-800-869-0212 or visit their Web site at www.indianajustice.org to find the legal services office that is closest to where you live.
- You can also check www.lawhelp.org to find free legal aid programs.
- State Health Insurance Assistance Programs (SHIPs) provide information, counseling, and assistance to Medicare beneficiaries. Contact Indiana's SHIP program, the Senior Health Insurance Program, at 1-800-452-4800.
- Protection and Advocacy ("P & A") programs provide legal representation and other advocacy services, under all federal and state laws, to all people with disabilities. In Indiana, contact Indiana Protection and Advocacy Services at 1-800-622-4845 (TTY 317-755-5555), or visit www.in.gov/ipas for more information.

6 If you are buying health insurance on your own you should be careful. Here are some tips to help you make a smart choice.

- Shop around before buying insurance on your own, because coverage and costs vary from company to company. When shopping for insurance, make sure you get answers to these important questions:
 - ? **Covered Services:** What medical services are covered?
 - ? **Deductible:** How much must I pay before the insurance starts to help pay for services?

- **? Copayments:** After I reach my deductible, how much do I pay for services, and how much does the insurance company pay?
- **? Limits:** Are there annual or lifetime limits on what the insurer will pay?
- **? Out-of-Pocket Maximums:** Does the policy limit the total amount that I have to spend for covered services in a year? Check the maximum carefully; sometimes, not all spending counts toward it. (For example, the deductible or copayments for care received outside of the plan's network may not count.)
- **? Pre-Existing Conditions:** Does the plan cover health problems I already have? If it does not cover these problems right away, when would it begin covering them? (Also see “Your Rights under Federal Law” below.)
- **? Provider Network:** Are the doctors I want to see covered by this policy? If not, would I have to pay extra to see any of my doctors because they are not “in the network”? Also, you may want to ask your doctor directly if he or she would accept this insurance for your care.
- Talk with a licensed health insurance agent in your area to help you find the right policy for the right price (agents are listed in the yellow pages).
- Be careful about plans that don't offer true insurance but offer only discounts on the cost of health care services. Generally, these plans are not a good buy.
- Be sure to find out if the insurance company you are thinking about buying coverage from has been licensed in Indiana and if there have been complaints about the company. To find this information, contact the Indiana Department of Insurance at 1-800-622-4461.
- Know your rights. Because you may run into problems shopping for an individual policy, you should be aware of your rights and protections under federal and state law. One resource that can help you learn more about these federal and state protections is online at www.healthinsuranceinfo.net. This Web site has a separate guide for each state.
- **Your rights under federal law:** HIPAA (the Health Insurance Portability and Accountability Act) is a federal law that may give you the right to buy coverage and that prohibits insurance companies from refusing to cover a health problem you already have (a pre-existing condition). To be eligible for these protections, you must have:
 1. had at least 18 months of group coverage (usually through a job),
 2. used up any COBRA continuation coverage rights (see page 2), and
 3. had no gaps in coverage longer than 63 days, so you must act quickly.

If you qualify for HIPAA protection, in Indiana, you are entitled to coverage through the Indiana Comprehensive Health Association, the state's high-risk pool. See “Indiana's High-Risk Pool for People with Health Problems” on page 7 for more information.

- **Your rights under Indiana law:** Indiana also has laws that control whether an insurance company must offer you a policy, what conditions must be covered, and how high the premiums can be for a policy. Because these rules are complex, you may need help understanding your rights to insurance coverage in the individual market. Call the Indiana Department of Insurance at 1-800-622-4461 for assistance.

7 If you can't find health insurance . . .

. . . you may be able to get some help from the following resources:

Free or Low-Cost Primary Health Care

A local free or community health clinic may be able to help you get low-cost primary health care. These clinics offer health services for the entire community, either for free or for a fee based on a sliding scale. You can check online to see if there is a community health clinic near you at <http://findahealthcenter.hrsa.gov> or call the Indiana Primary Health Care Association at 317-630-0845. Also check your state's information on the Free Clinic Association Web site at www.freeclinics.us/freeclinic.php.

Help with Hospital Bills

If you are uninsured and have to go to the hospital to get care, you may be able to receive some help paying your hospital bills. Some nonprofit hospitals are required to provide help because of their mission and tax status. Some states have laws that require hospitals to provide care for free or at reduced prices to people who are eligible. Also, many hospitals have financial assistance programs. There are also some federal laws that can help you.

If you receive a bill, it's important that you make an effort to pay it. Ask to speak with a financial counselor or a patient advocate at the hospital, as you may be able to negotiate a lower bill or a better bill payment plan.

Prescription Drug Discount Programs

You may be eligible for a free or discount prescription drug program through the company that makes the drugs you need. You can get more information about these programs online at www.rxassist.org and www.needymeds.org. The Partnership for Prescription Assistance, located online at www.pparx.org, also lists assistance programs.

Veterans' Assistance

If you are a veteran, you may be entitled to care and prescription drug coverage through a VA medical facility. You may be eligible for assistance if you served at least 180 days active duty and have an honorable or general discharge. Contact the VA Health Benefits Service Center toll free at 1-877-222-VETS.

Other Assistance Programs

You may qualify for programs in Indiana that can help you with drug costs and health care or other expenses. The Web site for the National Council on Aging, www.benefitscheckup.org, has a questionnaire that you can fill out to learn about a variety of local services for which you might qualify. Although the site focuses on services that are used by those ages 65 and older, many of the programs are available to younger individuals as well. In addition, some charities provide financial assistance to people with particular diseases. A partial listing of these charities is available online at www.needymeds.org, and you can also check with any societies, associations, or foundations that focus on your disease. Your local health department and local community organizations may also know of other places to get help.

Clinical Trials

Scientists may be testing methods of treating your condition through clinical trials. To learn more about participating in clinical trials, go to <http://clinicaltrials.gov>.

*These state guides are available online at
www.familiesusa.org.*

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